



Nutrition Substitution Staffing Plan

Purpose: This plan is to be used for personal, religious, and cultural food substitution requests to ensure children are receiving a variety of nutritious foods. **This form is NOT for milk substitutions.**

Date: _____ Site: _____

Child's Name: _____

In Attendance: _____

What happens if the child has _____

What foods do you serve at home? _____

Menu substitution ideas:

Classroom Plan: _____

A variety of foods will be offered based on the parent/guardian input and approval of substitutions from the Family Services Program Manager and/or Registered Dietician.

Parent/Guardian signature: _____ Date: _____

Lead Teacher signature: _____ Date: _____

Assistant Teacher Signature: _____ Date: _____

Family Advocate Signature: _____ Date: _____

Upload form to ChildPlus and email Family Services Program Manager for approval process.
Approval process may take up to 48 hours.